

NOTICE IS GIVEN, and it is ordered, that the claim below shall be disallowed or allowed as recommended below and, unless any chapter 13 confirmation order entered hereafter provides otherwise, the amount of any arrearage will be fixed as recommended below, without further order unless within 44 days of the date in the 'FILED' stamp the creditor either: (1) sends, with a copy of this objection, the proper documentation to the trustee/debtor-in-possession and any other objecting party at the service address(es) below, and receives a written withdrawal of objection; or (2) files a written request for a hearing, setting forth the specific grounds for such request, with the Clerk of Court (i.e., if the 5-digit portion of the Case No. begins with '3' or '4', at 1001 SW 5th Ave. #700, Portland OR 97204; or, if it begins with a '6' or '7', at 405 E 8th Ave #2600, Eugene OR 97401), and (b) serves a copy thereof on the trustee/debtor-in-possession and any other objecting party at the service address(es) below. [NOTE: This Order does not indicate how the Court will rule if a timely request for hearing is filed.]

The filer of the objection is hereby directed to the related notice regarding service of this objection.

UNITED STATES BANKRUPTCY  
DISTRICT OF OREGON

  
TRISH M. BROWN  
U.S. Bankruptcy Judge

In re

)  
) Case No. \_\_\_\_\_  
)  
)

)  
) **OBJECTION TO CLAIM, AND**  
) **ORDER AND NOTICE THEREON**  
)

Debtor(s)

1. The undersigned objects to Claim No. \_\_\_\_\_, filed in the amount of \$ \_\_\_\_\_, by:  
(Enter the current claimant's name, proof of claim notice address, and FRBP 7004 service address(es) of claimant)

2. The undersigned objects to such claim on the ground(s) it (check all applicable sections):

- ☐ Duplicates Claim No. \_\_\_\_\_ filed by \_\_\_\_\_.
- ☐ Fails to assert grounds for priority.
- ☐ Was not filed on behalf of a real party in interest (e.g., does not include a copy of the assignment(s) upon which it is based).
- ☐ Appears to include interest or charges accrued after the filing.
- ☐ Appears that value of collateral exceeds debt.
- ☐ Arrearage asserted is incorrect.
- ☐ The creditor filed a secured claim, but neither: (a) specified that any portion of the claim should be treated as

unsecured nor (b) requested a hearing to determine the value of their collateral, and therefore the trustee objects to any portion of the claim being treated as unsecured.

- ☐ The creditor filed a claim for taxes assessed against real or personal property of the debtor(s). The undersigned represents that the interest of the estate in the real or personal property against which the above taxes were assessed has no value in that the estate has no equity or interest in such property, and so under the provisions of 11 U.S.C. §502(b) no order can be made for payment of such taxes.
- ☐ Proof of claim does not include documentation required by FRBP 3001(c) and (d) (e.g., a copy of the note, or documents establishing secured status).
- ☐ Other:

3. The undersigned recommends said claim be (check applicable box(es)):

- ☐ Disallowed in full.
- ☐ (If objection is based on failure to provide documentation) Disallowed for distribution: If an amended claim including the required documentation is not filed within 30 days of the filed date noted above, no distribution on account of the claim will be made by the trustee or debtor.
- ☐ Allowed as a SECURED claim for \$\_\_\_\_\_; a PRIORITY UNSECURED claim for \$\_\_\_\_\_; AND a NONPRIORITY UNSECURED claim for \$\_\_\_\_\_. [You must fill in each blank even if it is \$0.]
- ☐ (If amount of arrearage is contested) The amount of the arrearage is \$\_\_\_\_\_.

4. **THE UNDERSIGNED CERTIFIES THAT** a copy of any Withdrawal of this Objection will be served on all parties that were served a copy of this Objection (i.e., the U.S. Trustee, any trustee, debtor(s), the creditor at the address shown above, and their respective attorneys; and, if the creditor is a federal agency, on the U.S. Attorney for the District of Oregon and the U.S. Attorney General).

DATE: \_\_\_\_\_

\_\_\_\_\_  
Objecting Party Signature AND Relation to Case

\_\_\_\_\_  
Objecting Party Name AND Service Address (Type or Print)

\_\_\_\_\_  
Objecting Party Phone Number

\_\_\_\_\_  
(If Debtor is Objecting Party) Debtor's Address AND Taxpayer I.D.#(s) (last 4 digits)